



0-07-02

EXPRESS MAIL NO. : EV207698471US

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(To be used for all correspondence
after initial filing)

TECH CENTER 1600/2900

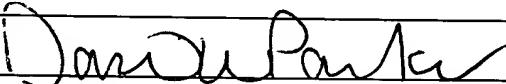
OCT 09 2002

RECEIVED

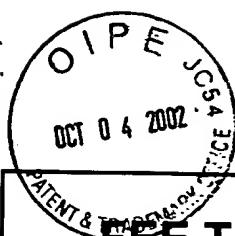
Application Number	09/043,813
Filing Date	September 29, 1998
First Named Inventor	Michael T. Kelly
Group Art Unit	1653
Examiner Name	Anish Gupta
Attorney Docket No.	850103.40301

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement; Form PTO-1449 <input type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Declaration <input type="checkbox"/> Statement under 37 CFR 3.73(b) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> CD(s), Number of CD(s) <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Additional Enclosure(s) (please identify below): <hr/> <hr/> <hr/>

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Individual Name	David W. Parker	 00500 PATENT TRADEMARK OFFICE
Signature		
Date	October 4, 2002	

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on the date specified below.		
Typed or printed name		
Signature		Date:



EXPRESS MAIL NO.: EV207698471US

PTO/SB/17 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 620

RECEIVED

OCT 09 2002

TECH CENTER 1600/2900

METHOD OF PAYMENT																																																					
<input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other																																																					
<input type="checkbox"/> Deposit Account: Deposit Account Number: 19-1090 Deposit Account Name: Seed Intellectual Property Law Group PLLC																																																					
The Commissioner is authorized to (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any deficiencies																																																					
to the above-identified deposit account.																																																					
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.																																																					
FEE CALCULATION																																																					
1. BASIC FILING FEE																																																					
Large Entity		Small Entity																																																			
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid																																																
1001	740	2001	370	Utility filing fee																																																	
1002	330	2002	165	Design filing fee																																																	
1003	510	2003	255	Plant filing fee																																																	
1004	740	2004	370	Reissue filing fee																																																	
1005	160	2005	80	Provisional filing fee																																																	
				SUBTOTAL (1)	(\$)																																																
2. EXTRA CLAIM FEES																																																					
Total Claims		Extra Claims	Fee from below	Fee Paid																																																	
Independent Claims																																																					
Multiple Dependent																																																					
<table border="1"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th colspan="2"></th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> <th></th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>18</td> <td>2202</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201</td> <td>84</td> <td>2201</td> <td>42</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203</td> <td>280</td> <td>2203</td> <td>140</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204</td> <td>84</td> <td>2204</td> <td>42</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205</td> <td>18</td> <td>2205</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="4"></td> <td>SUBTOTAL (2)</td> <td>(\$)</td> </tr> </tbody> </table>						Large Entity		Small Entity				Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description		1202	18	2202	9	Claims in excess of 20		1201	84	2201	42	Independent claims in excess of 3		1203	280	2203	140	Multiple dependent claim, if not paid		1204	84	2204	42	** Reissue independent claims over original patent		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent						SUBTOTAL (2)	(\$)
Large Entity		Small Entity																																																			
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description																																																	
1202	18	2202	9	Claims in excess of 20																																																	
1201	84	2201	42	Independent claims in excess of 3																																																	
1203	280	2203	140	Multiple dependent claim, if not paid																																																	
1204	84	2204	42	** Reissue independent claims over original patent																																																	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent																																																	
				SUBTOTAL (2)	(\$)																																																

**or number previously paid, if greater; For Reissues, see above

Complete if Known					
Application Number		09/043,813			
Filing Date		September 29, 1998			
First Named Inventor		Michael T. Kelly			
Examiner Name		Anish Gupta			
Group Art Unit		1653			
Attorney Docket No.		850103.40301			
FEE CALCULATION (continued)					
3. ADDITIONAL FEES					
Large Entity		Small			
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2520	1812	2520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	400	2252	200	Extension for reply within second month	
1253	920	2253	460	Extension for reply within third month	460
1254	1440	2254	720	Extension for reply within fourth month	
1255	1960	2255	980	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	160
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1510	1451	1510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1280	1453	640	Petition to revive - unintentional	
1501	1280	2501	640	Utility issue fee (or reissue)	
1502	460	2502	230	Design issue fee	
1503	620	2503	310	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee for provisional applications	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	740	2809	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	740	2810	370	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	740	2801	370	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify) _____					
*Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$ 620	

SUBMITTED BY			
Name (Print/Type)	David W. Parker	Registration No. Attorney/Agent	37,414
Firm Name/Address			
Signature	David W. Parker	Date	October 4, 2002



00500

PATENT TRADEMARK OFFICE